APR 1 6 2007	n Act of 1995	no persons are requi	red to re		and Trad	emark Office; U.S. D	gh 07/31/2006. OMB 0651-0032 DEPARTMENT OF COMMERCE	
\$ 2			espond to a collection of information unless it displays a valid OMB control number  Complete if Known					
FEE TRANSMITTAL For FY 2006			Application Number 10/767,339					
			Filing Date		January 28, 2004			
			First Named Inve		Shane Elwart			
			Examiner Name		Edward Johnson			
Applicant claims small entity status. See 37 CFR 1.27			Art Unit		1754			
TOTAL AMOUNT OF PAYM	IENT (\$)	0.00	ľ	Attorney Docket I	<del></del>	81090700		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order Other (please identify):								
Deposit Account De	posit Account	Number: <u>06-1510</u>	)	Deposit Acc	ount Na	me: Ford Global	Technologies, LLC	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) i	ndicated bel-	ow		Charge	fee(s)	indicated below. e	except for the filing fee	
Charge any ad	Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments							
under 37 CFR WARNING: Information on this	1.16 and 1.1	7	card info		•		Provide credit card	
information and authorization o	n PTO-2038.	ome public. Credit	cara iiii	ormation should not	De IIICI		Flovide Credit Card	
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
FILING FEES SEARCH FEES EXAMINATION FEES  Small Entity Small Entity Small Entity								
Application Type		Fee (\$)	Fee (\$)		Fee		Fees Paid (\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0	<u> </u>	
2. EXCESS CLAIM FEES Fee Description							Small Entity Fee (\$)	
Each claim over 20 (in	cluding Re	issues)				<u>Fee (\$)</u> 50	25	
Each independent claim over 3 (including Reissues)						200	100	
Multiple dependent cla						360	180	
Total Claims					,	Dependent Claims Fee Paid (\$)		
- 20 or HP = x = Fee (\$)  HP = highest number of total claims paid for, if greater than 20.							ree raid (\$)	
Indep. Claims								
- 3 or HP = x = HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 = /50 = (round up to a whole number) x =								
A OTUED SEE(0)								
Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)								
Other (e.g., late filing surcharge):								

SUBMITTED BY	XXX		
Signature		Registration No. (Attorney/Agent) 47,048	Telephone 503-459-4141
Name (Print/Type) John	D. Russell		Date April 11, 2007

This collection of information is sequired by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.